

## Jones County Points Program Registration Form

Name:			
Address (Street, City, 2	(ip):		
Email:		Phone:	
Are you expecting?  If yes,  Due Date:		nild?   Yes   No	
Are you currently brea	stfeeding or planning to bre	astfeed?   Yes   No	
Demographic Informa	tion		
Your Date of Birth:			
Marital Status: □Single □Married	□ Divorced □ Separated	□Widowed □Partnered	
Partner's Name (if app	licable):		
Primary language spok	en at home:		
<b>Educational Attainme</b> Are you currently enro	<b>nt</b> lled in school? □ Yes	□ No	
What is the highest gra  ☐ Elementary or mide ☐ Some high school ☐ High school diplom ☐ Trade/Vocational T	lle school   a/GED	Some college 2-year college degree (Associate) 4-year college degree (Bachelor) Other:	

Employment/Financial Situation Which of the following applies to you?		
☐ Employed full-time	☐ Homemaker	
☐ Employed part-time	☐ Disabled	
☐ Unemployed	☐ Retired	
☐ Student	☐ Other:	
Where are you employed (if applicable)?		
Annual household income:		
□ \$0 - \$10,000	□ \$30,001 - \$40,000	
□ \$10,001 - \$20,000	□ \$40,001 - \$50,000	
□ \$20,001 - \$30,000	☐ More than \$50,000	
Household size:		
Number of adults (age 18 years +):		
Child(ren) Information:		
Name:	DOB:	
Do you have access to transportation?		
☐ Own car	☐ Friends/family	
$\square$ Public transportation	☐ No access to transpo	ortation
Who referred you to this program?		
☐ WIC		
☐ Lutheran Services in Iowa (LSI)		
☐ Healthcare Provider		
☐ Friend:		
☐ Other:		
I hereby certify this application is complete to t given is true and contains no misrepresentation		and all information
Applicant Signature:	Date	<b>:</b> :



## Jones County Points Program Participant Guidelines

- Our funding is for parents and guardians who are pregnant and/or have a child under the age of 18.
- Points are given to participants who make healthy behavior choices for themselves and their family members. Proof must be provided to obtain the points.
- Program points cannot be shared with other participants.
- If a participant loses their point book, they will lose their points. Jones County Public Health does not keep a record of points.
- All sales are final.
- Participants are required to:
  - o Provide ongoing and formal feedback whenever redeeming points
  - Update paperwork annually
- Recipients are responsible for checking for recalls and ensuring the safety of the product for use by their child, and will not hold the Jones County Points Program liable for any problems that occur as a result of items received from our program.

Applicant Signature:	Date:	_
☐ I would like to receive occasional emails	s on community events, classes, programs, and	